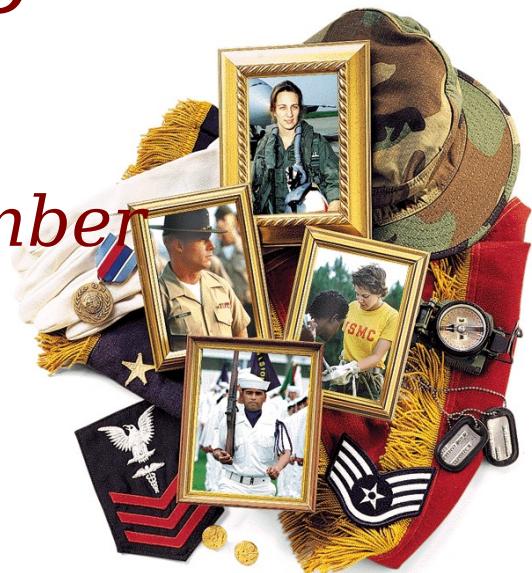




TRICARE Prime Remote *& Active Duty Family Member Providing Primary Care Program Benefits for Remote Active Duty and Their Families*



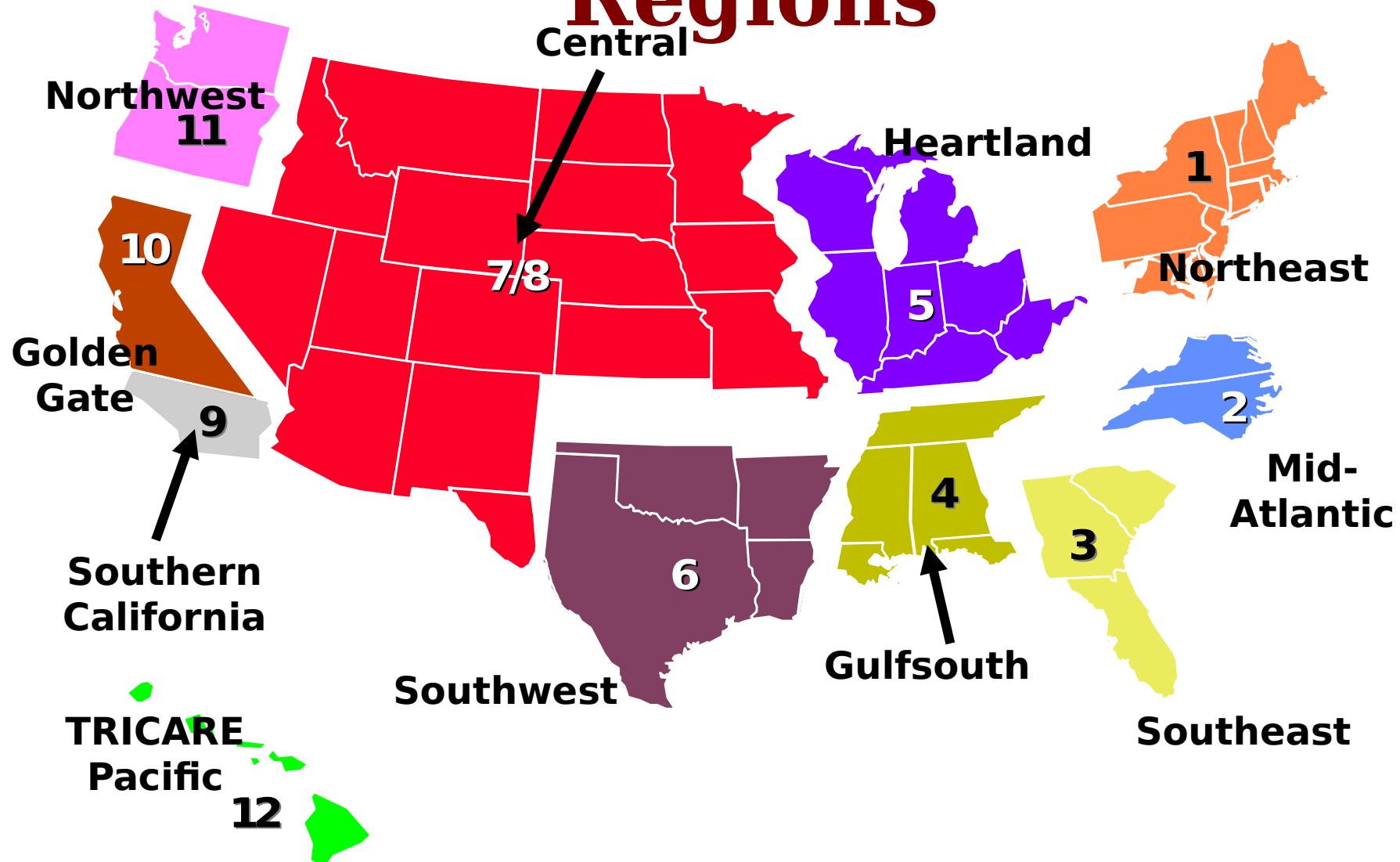
Sierra Military Health
Services, Inc.



TRICARE

Regions

Central



Types of Providers

- **Non-network**
- **Non-authorized**
- **TRICARE Network**



Non-network Provider

- **Authorized, Participating Provider**
 - TRICARE Certified
 - Submits claims
 - Beneficiary pays 20% cost-share after deductible, no balance-billing
- **Authorized, Non-participating Provider**
 - TRICARE Certified
 - May bill up to 115% of TRICARE Maximum Allowable Charge (TMAC)
 - ~~- Beneficiary pays 20% cost-share after deductible, plus balance-billing~~
- **Non-authorized, Non-participating Provider**
 - **Not** TRICARE Certified
 - Patient pays **entire** bill

Network Provider

- **Signed contract with SMHS to provide care at a negotiated rate**
- **Used by Prime and Extra beneficiaries**
- **Accepts TMAC rate**
- **No balance-billing above TMAC**
- **Submits claims**



TRICARE Eligibility

- **Active Duty**

- Must enroll in TRICARE Prime Remote

- **Active Duty Family Members**

- Enroll in TRICARE Prime Remote or
 - Use TRICARE Extra or Standard

- **Verify eligibility**

- DEERS: 1-800-538-9552
 - www.tricare.osd.mil/remote
 - Nearest military ID card facility
 - Defense Manpower Data Center
Support Office: 1-800-538-9552

Triple Option

- **TRICARE Prime Remote**
- **TRICARE Extra**
- **TRICARE Standard**



TRICARE Standard

Option for Family Members

- **Highest out-of-pocket cost**
 - Yearly deductible
 - Balance billing up to 115% of TMAC
- **May need to file your own claims**
- **Services at the MTF on space-available basis**
- **Non-availability Statement**
- **No enrollment required**
- **Greatest choice of providers**
- **Must use TRICARE authorized providers**

TRICARE Extra

Option for Family Members

- **Use TRICARE Network Providers**
- **Fees 5% less than TRICARE Standard**
- **No claims to file** (unless you have other health insurance)
- **No balance-billing**
- **Same deductible as TRICARE Standard**
- **Services at the MTF on space-available basis**
- **No enrollment required**

TRICARE Prime Remote

Required for Active Duty -- Option for Family Members

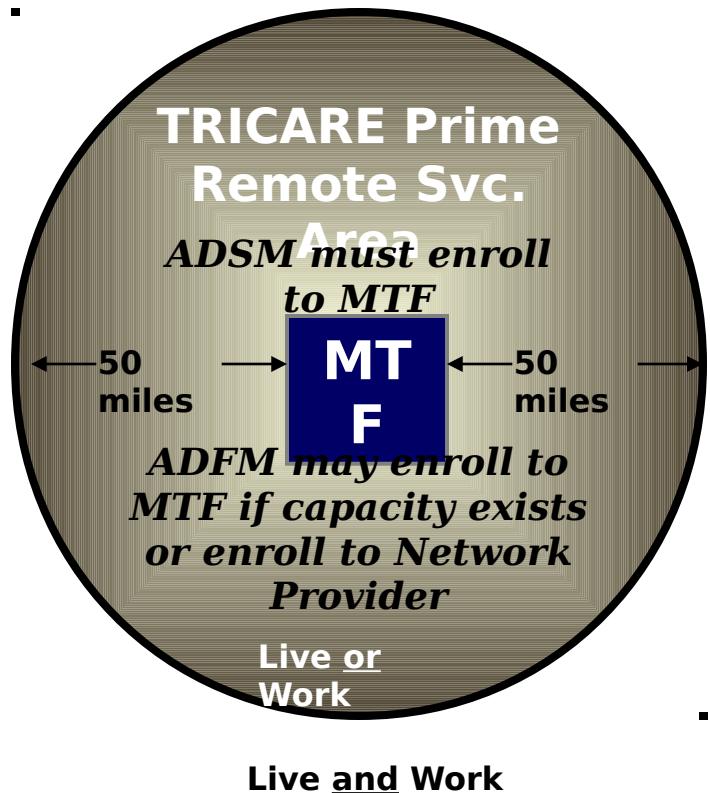
- **Lowest out-of-pocket cost**
 - No fees at the MTF, except inpatient care
 - No copayments for Active Duty Family Members
 - No balance-billing
- **Priority appointments at the MTF** (if enrolled at site)
- **Primary Care Manager**
- **TRICARE Network Providers**
- **No claims to file**
- **Enrollment required by everyone, including Active Duty Service Members**



Eligibility

Determined by Location

- **Active Duty Service Members (ADSMs):**
 - Who reside more than 50 miles (or more than one hour drive) from a Military Treatment Facility (MTF), AND
 - Whose duty location is more than 50 miles (or more than one hour drive) from an MTF
- **Eligible Active Duty Family Members (ADFM) living with their sponsor**



TPR Benefits

for Active Duty and Their Family Members

- **Enroll to a civilian Primary Care Manager (PCM)**
- **Health Care Information Line**
 - Speak with a nurse
 - Health Information Library
 - 24 hrs./day, 365 days/yr.
 - Toll-free telephone number 1-800-308-3518
- **Pharmacy**
- **Preventive care services**

Primary Care Manager (PCM)

- **TRICARE Network Provider**
- **Provides continuity of care**
- **Provides or arranges ALL medical care**
 - Required to coordinate referral for specialty care
 - If you receive non-emergency care without a referral and authorization you will pay Point-of-Service (deductible + cost-share)
- **Can be Family Practice,
Internal Medicine,
Pediatricians, or OB/Gyn**



Using a Non-Network Provider PCM

for Active Duty and Their Family Members

- **Use TRICARE-Authorized provider where TRICARE Network is unavailable**
 - Provides routine medical care
 - Offers continuity of care
 - Coordinates specialty care referrals

Routine Care

- **Visit your PCM**
- **No prior authorization required**
- **Routine office visits (including lab tests and x-rays)**
- **Preventive healthcare:**
 - Immunizations
 - Hearing tests
 - Routine eye exams
 - Breast exams and Mammography
 - Pap smears
 - Prostate (and other cancer-prevention or early diagnosis) exams

Specialty Care

for Active Duty Service Members

- **PCM makes referral**
- **All specialty care requires authorization**
 - SMHS coordinates with Military Medical Support Office (MMSO)
 - MMSO performs “fitness for duty” determination:
 - If yes, referred to MTF
 - If no, local care HCF assists in finding specialty care

Specialty Care

for Active Duty Family Members

- **PCM makes referral**
- **All specialty care requires authorization**
 - HCF authorizes specialty care
 - Patient should call Appointing at 1-888-999-5195 to book their appointment

Urgent Care

- **Medical attention for condition that is not life-threatening, but could become critical if not treated**
- **Use the Health Care Information Line for guidance**
- **Prior authorization required** - Make two phone calls
 1. *Before receiving care* - Call SMHS to find a provider
 2. *After receiving care* - Within 24 hours, call SMHS to provide information about the services so your claim will be paid

Ancillary Services

- **PCM ordered laboratory, x-ray or other supplemental services** (additional co-payment required)
- **Many TPR sites may have no Ancillary Services Network**
 - Members should contact SMHS to determine if a Network facility is available before receiving any services outside their PCM's office

Mental Health Services

- **Outpatient mental health or alcohol/ substance abuse services outside PCM's office**
 - ADSMs must call SMHS at 1-888-999-5195 (select the option for “mental health”) to have mental health services coordinated through MMSO
 - ADFMs must contact Options (1-888-999-5195, select the “mental health” option)
 - First eight (8) outpatient visits during a fiscal year need to be registered but do not require prior-authorization
 - Authorization is required for any outpatient visits beyond the first eight (8) during each fiscal year
- **All inpatient treatment requires prior-authorization**

On The Move

- **Covered during leave/travel/ change of duty station for emergency and urgent care**
 - For urgent care contact SMHS for authorization (1-888-999-5195) prior to receiving the care.
 - For emergency call 911 or go to the nearest emergency room.
- **Portable to areas where TRICARE Prime exists**

Costs

- **No enrollment fee**
- **No payment for care provided by PCM or for authorized specialty care**
- **Possible payment for care from TRICARE authorized non-network providers up-front**
 - Reimbursement after filing claim
- **Pay for all non-authorized care** (except emergency)

Point-of-Service (POS) *for Active Duty Family Members*

- **If you receive non-emergency care without a referral and authorization**

Deductible	\$300/person \$600/family
Cost-share	50% of allowable charges after deductible

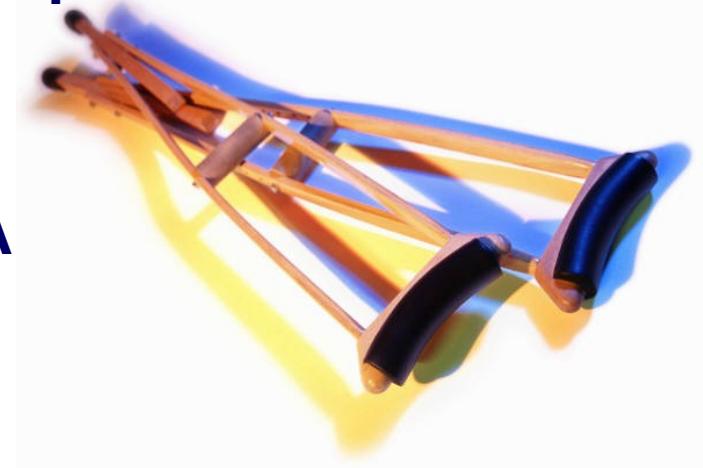
- **No reimbursement for non-covered services**
- **If you have other health insurance, POS does not apply**
- **Does not apply to Catastrophic Cap**

Enrollment

- **Enrollment required (not automatic)**
- **Complete Enrollment Form**
 1. Choose a PCM from TRICARE Network Providers
 2. May administratively enroll if there are no Network providers within access standards
 3. Include home and work zip codes of the sponsor
- **Receive a TRICARE Prime ID card**

Emergency Care

- **TRICARE follows the Prudent Layperson rule**
- **Only required to call SMHS within 24 hours of ER visit if admitted to the hospital**
- **Notify your PCM as soon as possible about ER visit and to arrange follow-up care**
- **When traveling, may be required to pay up-front; must submit claim to PGBA for reimbursement**



Pharmacy Benefits

Pharmacy Options - Cost		
	Generic Drugs	Brand-name Drugs
MTF	\$0	\$0
NMOP* (90-day supply)	\$3	\$9
Network Retail* (30-day supply)	\$3	\$9
Non- Network*	<p>Standard</p> <p>\$9 or 20% of total cost, whichever is greater, after deductible:</p> <ul style="list-style-type: none">▪ E4 & below: \$50/person or \$100/family▪ E5 & above: \$150/person or \$300/family▪ Retirees & Family: \$150/person or \$300/family <p>Prime - Point-of-Service</p> <p>50% cost-share, after deductible:</p> <ul style="list-style-type: none">▪ \$300/person or \$600/family	

**May be required to pay up-front and file a Claim Form for reimbursement.*

Note 1: If generic is available, but you choose a brand-name medication, you pay entire cost of medication with no coverage from TRICARE.

Dental Benefits

- **Active Duty Service Member coverage**
 - Annual exam/cleaning/fillings do not require prior-authorization
 - Anything more (ex: *root canal*) does require prior-authorization
 - MMSO pays dental claims (not PGBA)
 - See *Remote Controller* for more information
- **Active Duty Family Member coverage**
 - *TRICARE Family Member Dental Program* administered by United Concordia: 1-800-866-8499

Claims

- **If you see a non-network provider, you may need to pay for services up-front. If so, pay the bill and submit the following information for reimbursement:**
 - Itemized Bill
 - A completed claim form (DD Form 2642) for services received
 - Explanation of Benefits from Other Health Insurance if applicable
- **Submit all bills in the Northeast Region to:**

PGBA - Region 1
PO Box 7011
Camden, SC 29020-7011

Interim Waived Charges Benefit

for Active Duty Family Members

- **Interim Waived Charges Benefit introduced end August 1, 2002**
- **Families of TPR Active Duty Service Members not enrolled in the TPRADFM Program by September 1, 2002, will be TRICARE Standard**
 - TRICARE Standard deductibles and cost shares will apply for those not enrolled in TPRADFM

To-Do List

- ✓ **Regularly update important information about you and your family in DEERS and with SMHS**
- ✓ **Know how to access care**
 - use your PCM
 - carry wallet card with important health phone numbers
- ✓ **Understand your responsibility for co-payments**
 - No balance billing (115% rule)
 - POS option
 - ADSM do not pay any co-payment with Network Providers
- ✓ **Save Explanation of Benefits (EOB) statements**
- ✓ **Save authorization numbers**
 - Urgent care visit authorization is for one visit only
 - Understand the number of visits authorized when you receive a referral

More Information

- **Sierra Military Health Services**
 - www.sierramilitary.com
 - 1-888-999-5195
- **TRICARE Management Activity**
 - www.tricare.osd.mil
- **DEERS**
 - 1-800-538-9552
 - addrinfo@osd.pentagon.mil
(address changes only)
- **DoD** (TSRx & TFL)
 - 1-877-DOD-MEDS
- **Medicare**
 - www.medicare.gov
 - 1-800-MEDICARE
- **MMSO**
 - mmso.med.navy.mil
 - 1-800-MHS-MMSO
- **National Mail Order Pharmacy**
 - www.merckmedco.com
 - 1-800-903-4680
- **Check claims online**
 - www.mytricare.com